

News in the making: themes and changes in health coverage in Portugal

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1. An introduction to the project “Disease in the News”

This article presents some results of an ongoing research project developed at the University of Minho, Portugal and named “Disease in the News”. This project started in 2008, with the purpose of analyzing the relationship between health representations in the news and production practices involved in this type of media coverage.

Media health research has been a field of interest among international media researchers for a long time. However, due to structural reasons, research conducted in Anglo-Saxon countries has had a larger audience. It is known by now what are the main interests and also the main absences in this research area. Previous studies have focused mainly on mass media depictions of health and disease and on written texts, especially from newspapers, with more sporadic studies involving production and reception analysis (Seale, 2003; Hodgetts & Chamberlain, 2006). Research on news media reporting of health, disease and health risk has concurred to the idea that the mass media have been central to the social construction and public perception of these issues, as well as for what it means to be an “healthy person” or a “sick one” (e.g. Lupton 1993). Regarding mainstream newspapers, this research highlights the

predominance of a biomedical frame in news coverage (Gymny, 2002; McAllister, 1992) and the tendency to depoliticize health through an emphasis on individual responsibility (e.g. Wallack, 1990; Clarke and van Ameron, 2008), and on biomedical technologies (e.g. Clarke and Everest, 2006), as well as a neglect of critical public health perspectives (e.g. Lupton, 1995; Kippax and Race, 2003; Waldby, 1996; Crawford, 2006). At the audience level, research has shown the active processing of media health messages and the complexity of reception processes, meaning that diversity in responses can not be equated with diversity of meaning: the fact that there is “resistance” to “medicalized” coverage does not necessarily mean audience “freedom” or “power” (Miller, 1998: 210).

Substantially fewer studies are oriented to analyze news production practices involved in health coverage (e.g. Hodgetts *et al* 2008; Briggs & Hallin, 2010). These studies reveal several sublogics that play a significant role in health reporting, the conflicting interests that shape media agendas and the inconsistency between the imperatives of science and medicine and those of journalism (Meyer, 1990; Klaidman, 1990; Dearing and Rogers, 1992). On this subject, the typical focus of most research is on the “miscommunication” of medical knowledge (Schuman and Wilkes, 1995).

In Portugal, health and disease issues have not been on the agenda of media researchers in a systematic way. There are, of course, some studies on the manifest content of HIV/AIDS press coverage (e.g. Ponte 2005; Traquina, 1998), on the process of sourcing aids news (Santos, 2000), and on newspapers’ discourse on drugs addiction and addicted people (e.g. Pinto-Coelho, 1993; 2005). But one cannot say that this research compounds a field of media studies on health. This underdevelopment is noticeable when it comes to media education at universities, where one cannot find any kind of degree on media and health. This research team is, therefore, committed to contribute to the advancement of the relationship between these areas and has been developing a project oriented to the analysis of news texts and news production practices on health issues.

2. Questions and Aims

The project “Disease in the news” looks for the study of media coverage of health and disease issues in general and it does not favour a particular disease, aiming to overcome the excessive research focus upon illness. Moreover, we share the idea that any understanding of “disease” through media coverage must be considered alongside the conception of “health” depicted by the news. Health and disease should not be seen as opposite, but as implicating each other (Radley *et al.*, 2006), meaning that a full understanding of what they represent in newspaper coverage can only be achieved if we are able to grasp the full picture.

Therefore, we have been deepening this perspective through the investigation of news sourcing and production practices of health and disease stories. Despite the strong visibility of *official sources* (with a regular presence in the Portuguese journalistic discourse, as they have established media relations routines, easy access to media channels, public notoriety, and other advantages), we have been considering the analysis of *specialized sources*, whether they are institutional (speak for a group) or not (speak for themselves). At this level, health professionals seem to deserve a particular attention, because they represent some kind of “legitimate knowledge” acquired by either their position or their professional practice. This means that they are licensed and legitimated to talk about several dimensions of health and disease, because they are a link between the health system and the patients. In this matter, we have been looking to highlight the media strategies used by the sources, as well as to give an account of the way the interaction between source strategies and media “factors” influences the news and may explain similarities as well as differences in the coverage of health and disease issues.

3. Theoretical Background

This research project departs from an assumption: it is socially important to produce changes in the way newspapers cover health issues and the best tactic to achieve this goal is to bring together journalistic and strategic communication approaches. This belief is viewed as a path to achieve an ultimate concern: to improve the quality of media information on health issues, in order to empower individuals, by providing them with better knowledge, which will enable them to be more critical and proactive, as potential or actual patients and as citizens. We believe that

this type of change will be achieved by understanding and promoting alterations in professional cultures of health professionals (sources) and journalists, especially when it comes to the production of news material on health.

These assumptions and this purpose relate two major concepts: “journalism” and “health”. These are complex, multifaceted and evolving concepts. Nevertheless, this research design results from an option, when considering possible theoretical approaches to “journalism”, “health” and the “mediatisation of health”. We will briefly address the boundaries and meaning of each of these concepts (health and journalism) and explain how they articulate in this model. To begin with, we address both notions from a sociological point of view, that is, we view journalism as a social activity, produced and received in a social context, and we consider “health” as a public good, as “public health”.

As for journalism, we support the notion that it participates in a process of “social construction of reality” (Neveu, 2005: 103), in the sense that it has the ability to set the agenda for public debate and takes the public agenda in consideration to define what is news. This point of view is, therefore, incompatible with the perspective of a helpless and passive audience. The dimension of “construction” brings us to the idea that the production of news is a process, which engages a set of activities and journalistic routines (as factors of production).

This is the approach also taken by McNair (1998), when defending the need to “understand the impact of journalistic media on, and their contribution to the workings of contemporary” (3) societies, and the importance of realizing “the social determinants of journalistic output – those features of social life and organization which shape, influence and constrain its form and content” (3). This takes us to another object of study in this research – the journalistic text – therefore seen as “the product of a wide variety of cultural, technological, political and economic forces, specific to a particular society at a particular time” (McNair, 1998: 3).

The role of media in society (and the way society organizes itself) has been seen by the sociology of journalism in the form of a debate between two different ways of looking at it: the paradigm of “competition” (McNair, 1998), also referred to as “normative” (McQuail, 2003); and the paradigm of “dominance” or “alternative”. The first has been traditionally taken as reference to research and journalism education, as well as it is commonly accepted as a guide by

journalists, at least as expressed in their professional discourse. This model expresses the ideal or “how things are supposed to be” (McNair, 1998:19), and it is based on the notion that journalism should function as a watchdog, in a democratic, liberal and plural society. The accomplishment of this task lies in the independence of journalists and media organizations, from political power (by private ownership) and from economic power (by diversity of ownership and, subsequently, by plurality of perspectives and true competition of thought).

This approach has been criticized for its impracticability: although it expresses how journalism should be, it is not matched by the real performance of journalists and media organizations. According to the “dominance” or “alternative” paradigm, journalism is “part of a cultural apparatus, the primary function of which is to maintain relations of domination and subordination between fundamentally unequal groups in society” and it serves “not the public (...) but the dominant, private, selfish interests of a society” (McNair, 1998: 22). The role of the media, therefore, lies on disseminating ideology on behalf of the groups whom they report, but they also function as an outlet for communicating the already existing ideological system. This happens in a society divided into dominant and subordinate groups, and journalists perform this role whether they are aware of it or not.

As far as our research is concerned, we do not believe that assuming this tension as a theoretical approach is the most productive program. We do believe that the “competition” paradigm needs to be readdressed, under a critical point of view, which does not mean that it should be done in light of the “degree of conspirational intent” (McNair, 1998: 31) implied by the “dominance” model. For that reason, we propose to “break away from the competition-dominance, normative-critical, liberalism-materialism frameworks, focusing instead on the dynamics of the production environment and the relative impact of the elements within that environment on the form and content of output” (McNair, 1998: 33).

In this framework, our task will lie on confronting this environment, in order to map its outlines, and to predict, whenever it is possible, how certain events will be reported and to estimate the possible effects of that information on society (citizens), knowing that the power and effect of all those factors of production (internal and external to newsrooms) can be changed by the actors that have roles to play in the process. All these factors can be empirically observed and analyzed and, consequently, made and opened to debate.

At the level of journalism practice (news production and publishing), health issues are especially important, for a number of reasons: because they concern a “public good”; because of their considerable impact on people’s perceptions about those issues; and, consequently, because they enable research and debate on the social representations constructed by “health journalism”.

Thus, the study of news material on health issues immediately entails a great challenge: the meaning of health itself. The most common definition is the one stated on the Preamble to the World Health Organization Constitution: “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity”. Nevertheless, this concept of health has raised some concerns, because it emphasizes a state which is very difficult to attain, and because it implies a strict partition between physical, mental and social levels. Currently, research has been pointing out other perspectives, which deal with health, and illness through a multidimensional approach in which individuals, but also society (throughout several social areas such as politics or economy), perform decisive roles (Herzlich, 2004). We do not share such radical thesis as René Dubos’ (1963), for whom “there is no universal definition of health”, but we do believe this is a social field in constant development, whose borders should be delimited considering two main variables: actions undertaken and actors. In such a framework, we are interested in actions that promote people’s physical, mental and social well being and in the individuals/actors in charge of those actions, which involves, from start, a particular attention to public health understood as:

- Knowledge: an organized set of information which gathers data from several domains (Medicine, Epidemiology Demography, Sociology, Law, etc);
- Practice: “to do” abilities, materialized in the execution of health policies, in medical services management or in biomedical practices;
- Collective phenomenon: social perceptions on the concept of life quality, as the cause of the equilibrium of individuals and society.

A wide field is, therefore, opened up to biomedical professionals, to the people in charge of creating and managing those policies and structures devoted to ensure our

physical/mental/social well being and to everyone covered by these acts: all of us, as citizens, to whom health is a crucial public good. This is, thus, our research theoretical framework.

4. Thematic Approach 2008 - 2010

4.1 Methodology

Looking to produce an overview on health news coverage in Portugal, for the three year period we have been studying this issue, we will present a **thematic analysis** on the 4 413 texts we have gathered. Although the project has broader interests (to evaluate the relevance of health information, from the number of published news; to study diseases' coverage in particular; and to identify the main features of news production on health, namely the sources strategies), **the main goal of this paper is to understand which health news topics are the most relevant and why.**

The wider research is based on an extensive approach, in the sense that it aimed at mapping the field, through an analysis of news sources that includes the examination of seven variables: *existence/absence of sources; number of quoted sources; sources' geographic location, gender, identification, status and medical expertise*. Therefore, the first part of the study consists of a quantitative analysis, through descriptive statistics. These options are based on the primary objective of the global research: providing an exploratory overview, before testing hypothesis on variables' association (the next step).

As for the selection of analysis units, we opted for non-probabilistic sampling. Therefore, we chose newspapers (putting TV, radio and 'online' aside, for now) because it was more convenient. Given the available resources at this stage, data access is one of the most relevant criteria. The option for the general press is justified by this study's general objectives as stated above. Given those goals, the specialized press would be inadequate as a unit of analysis. As for the choice of "Expresso", "Público" and "Jornal de Notícias" (a weekly newspaper and two daily newspapers), this is typical cases' sampling. By choosing different types of newspapers we are pointing out to the implicit hypothesis that there may be differences in the way daily and

weekly newspapers treat information. The same applies to their editorial orientation: popular or broadsheet. However, at this stage, we did not study this hypothesis.

The present study is focused on the analysis of every edition of the three Portuguese newspapers (“Expresso”, “Público” and “Jornal de Notícias”), from 2008 to 2010 (4415 news articles), and it reveals the most covered health themes. This thematic approach highlights the journalistic process of “social construction of reality”, stressed by Neveu (2005: 103), and the weak position held by citizens in the information literacy development.

4.2 The present study: a triennium overview

The next description and discussion has the purpose of developing a general thematic overview on the media information in Portugal from 2008 to 2010, through the eyes of three important newspapers. On a global analysis, our study found out that when it comes to news themes (table 1) *Health Policy* is the most common one, gathering 28,6% (1261 news articles) of published news in the three newspapers during the analyzed years. This theme assembles all news concerning policies in the health field, such as hospitals organization, health laws, etc. *Case Histories* is the second most covered news theme (25,7%), with 1135 news.

However, between 2008 and 2010, we can find different annual trends in news coverage. *Health Policy* news highly decreased from 2008 to 2009 (followed by a small recovery in 2010: 42,7%, 19,3%, 38%), while *Case Histories* news pieces have increased consistently over the years (20,9%, 32,6%, 46,5%).

Table 1: News coverage themes between 2008 and 2010

	2008			2009			2010			
	Público	JN	Expresso	Público	JN	Expresso	Público	JN	Expresso	Total
Prevention	31	27	5	44	16	0	9	25	2	159
Research	75	79	17	52	26	12	76	57	8	402
Case Histories	58	172	7	142	199	29	177	301	50	1135

Risk/Alarm Situations	88	36	7	131	349	47	34	28	7	727
Clinical Acts	97	51	14	41	24	4	47	62	6	346
Health Economics	31	23	17	34	12	8	88	110	10	333
Health Policy	281	211	46	132	98	14	203	264	12	1261
Others	27	5	0	6	1	2	8	1	0	50
Total	688	604	113	582	725	116	642	848	95	4413

In addition to *Health Policy*, there are other themes with a decrease in the percentage of news coverage during the three years period (see table 1). We believe that this happened due to the Influenza A phenomenon in 2009. This pandemics suddenly increased news on *Risk/Alarm situations*, which represented 18% in 2008 and 72% in 2009, followed by a news coverage decrease in 2010 (9,5%).

Prevention was the theme with the smallest news coverage during the three years period: it only represented 3,6% of the total amount of news. There was a consistent decrease in *Prevention* news from 2008 to 2010, which was somewhat surprising given that we would expect Influenza A to have enhanced news on this theme during the year of 2009. That did not happen, though.

In table 1, we can see a newspaper cross-analysis. In 2008 there are 1 405 news pieces published by the three newspapers, but there are some differences when we look into the most covered themes. “Público” pays more attention to *Health Policy* (40,8%) and the second most covered theme is *Clinical Acts* (14,1%), followed by *Risk/Alarm Situations* (12,8%) and *Research* (10,9%). *Case Histories* is placed in fifth (8,9%). Regarding “Jornal de Notícias”, *Health Policy* is also the most covered theme (34,9% of all news in 2008) and *Case Histories* is the second most covered one (28,5%). *Health Policy* is, as well, the preferred theme in the weekly newspaper “Expresso” (40,7%). Secondly, we have *Research* and *Health Economics*, both representing 15% of the coverage. *Case Histories* represents only 6,2% of health news published during 2008.

4.3 Dominant Themes: Health Policy, Influenza A and Case Histories

2008

Over the three years, there was a relevant variation of news topics and concerns that can be made comprehensible through the analysis of a set of contextual factors.

In the beginning of 2008, Correia de Campos was the Health Minister of José Sócrates government – a left wing government –, who won the elections in 2005. Correia de Campos' administration of health was not consensual and he was involved in several polemic situations, due to the closing of birth rooms across Portugal. He left this position on the 29th of January 2008 and was replaced by Ana Jorge, a doctor. Correia de Campos had a particular way of dealing with the media, providing journalists with information very frequently and talking to them directly. During his administration there was an extreme news coverage regarding health policy, all due to his own communication strategy. His successor was more restrained in communicating with journalists. Correia de Campos was often the direct source in the news, while Ana Jorge was quoted indirectly. The new Health Minister began being quoted when speaking in Parliament or when talking in public ceremonies. This attitude kept her away from the controversies we became used to with Correia de Campos.

The year of 2008 had started with protests against the reshuffle of hospital emergency rooms and 24-hour health services. These protests were highlighted in the media, with political voices and the common citizen represented in the press. Correia de Campos reacted intensely, contributing to increase the discontent. The media covered these issues permanently. On the one hand, Correia de Campos fostered the situation by talking a lot to the media; on the other hand, he complained on the excess of media coverage. His public relations model can be categorized as 'the steward', using van Ruler's classification (2003) and viewing communication as contact.

Ana Jorge, a pediatrician, became Health Minister in February 2008. She was very restrained and did not talk much to the media. She was not silent, though, but she usually spoke within events: in the Parliament, at ceremonies for the opening of services or conferences. She was often evasive and refused to talk when certain delicate issues were mentioned by journalists.

This new Health Minister did not answer spontaneously to journalists' unexpected questions. She prepared her speech carefully and did not talk outside scheduled events. Sometimes there were indirect quotes in the newspapers, usually non-identified: "Ana Jorge's press office said..." ("Expresso", 8th of March 2008); or "... according to a press officer from the Health Ministry..." ("Público", 17th of June 2008).

This way of communicating was specially used regarding negative themes. In a news piece by "Público" on the 14th of November, the news was written based on a press release aimed specifically at that newspaper. This news article was on the finances of Health National Service. Another communication strategy was the use of the Secretaries of State for Health as accidental spokespersons. They assumed what should be said by the Minister, keeping the protests away from her and calling the attention at themselves. Communication politics were carefully designed not to block interaction flows with journalists, while permanently looking into giving positive messages. One can perceive an effective back office work done by press officers, who were almost invisible in the news. This public relations model can be named 'the facilitator' (van Ruler, 2003) and communication is about mediation and management.

2009

In 2009, a dramatic shift on news themes happened. *Risk/Alarm Situations* and *Case Histories* represented almost half of the news articles published. In daily newspaper "Jornal de Notícias" they represent three quarters of news. A large amount of those news pieces was on Influenza A, which deserved great media coverage. Actually, this is an atypical year when it comes to health media coverage.

In that year the world faced the possibility of an Influenza A pandemic which caught media's attention. The first reports emerged in March, with the announcement of a new Influenza type, in Mexico. In April, the World Health Organization (WHO) named the disease as "Influenza A, H1N1", because it was similar to the common flu (influenza type A) but had a particular subtype (H1N1). The new virus had genes from the human, avian and swine variants but it showed a totally new combination. Therefore, specialists soon started to highlight the dangers this new influenza could have on humans, due to its contagiousness and unpredictable evolution. The WHO declared Influenza A as an international public health emergency and stated a pandemic

alert. In June it had already reached its maximum level, on a risk scale from 1 to 6¹. The possibility of a pandemic and its consequences to the world population made this issue a priority to public health authorities in every country.

In Portugal, media followed intensively the disease's evolution. There was a lot of media coverage, which was not very common, and somehow reflected the high news value national media gave to this. This news value started being questioned by opinion makers, given that the worst premonitions on the pandemic did not happen through 2009. The Portuguese Directorate-General for Health pointed out, in June, to the probability of 8700 deaths in the worst case scenario and 500 in a benign prevision². However, in the end of 2009 the total number of deaths by Influenza A in Portugal was 69³. This number expressed an incidence of the disease that was below the previsions and brought to light the media's role during 2009. The hypotheses of a "media pandemic"⁴ was risen. Journalists' alleged permeability to press officers and national health authorities was one of the most discussed issues. There were some concerns with the government's media coverage and information management, which led to a permanent and controlled attention by national media. And this actually was very similar to the international media situation.

2010

In the year of 2010, the last one in our analysis, the dominant themes were *Case Histories*, *Health Policy* and *Health Economics*. There was not much diversity in the news articles, except for *Case Histories*. The other two themes did not promoted a great variety of topics and news pieces, usually gave already published background information. When it came to new sources, they were not diverse, especially when the themes were related to politics or economics.

Case Histories were written with different purposes, although there were not significant differences within the three analyzed newspapers. All three of them had a great amount of panoramic news on health topics, even if daily newspapers showed a preference by National/International events that were not as important to weekly newspapers.

¹ Data from the Portuguese Directorate-General for Health, alerta@dgs.pt, 29th of June 2009.

² "Diário de Notícias", 18/07/2009.

³ Data from the Portuguese Directorate-General for Health, 30/12/2009, in <http://www.portaldasaude.pt>

⁴ Example: on the 12th of July 2009, *Público* wrote "Influenza A (H1N1): 'It's not the end of the world to have this. I had worse flues'"; on the 20th December 2009, Lusa (Portuguese news agency) suggested that "Influenza A media obsession avoided panic".

Through 2010 there were a great number of news articles on political decisions, most of them resulting from a Health Ministry's plan to define new rules and organization procedures to oncology hospitals in Portugal. The Government's document proposed a minimum number of cases in order for hospitals to work; hospitals had to have 500 new diagnosed cases and 250 treated patients per year. These were the requisites for a hospital to have a cancer department. This document resulted in a major discussion, which was made by a small number of official sources and a group of politics from different parties.

This reorganization of hospitals also generated a discussion within the Parliament and some specialized institutions, as the Doctors National Board. All these political actors promoted meetings that became moments of pressure for the Health Ministry, partly due to media coverage caused by these pseudo-events.

When it came to news sources, there was a supremacy of official sources related to the Health Ministry and the political parties' representatives. They handled this discussion, sometimes also controlled by the Oncology College within the Doctors National Board. The political debate around this issue promoted cancer news coverage in other topics: media wrote case histories reports on cancer treatment and interviewed health specialists related to cancer. However, these news pieces were an exception in the agenda process. There was not an agenda-setting effect, and one could perceive a "news sources' brotherhood".

Health economic themes were diverse, even though there were two main ones: the financing of public health sector and the pharmaceutical field. Private health sector almost does not exist according to the Portuguese press. This theme's news angle was mostly negative. Journalists wrote about debts, budget reduction, etc. Medical laboratories or private health groups, which are traditionally identified with powerful lobbies, did not have much power when it came to agenda-setting.

5. Conclusions

Our findings indicate that there were three dominant themes in Portuguese news coverage between 2008 and 2010, within our sample. We refer to (1st) *Health Policies*; (2nd) *Case*

Histories; and (3th) *Risk/Alarm Situations*. All of those thematic options were context-related, having as genesis national or international motives.

The *Health Policies*' dominance as news topic is connected to the power of the official and specialized sources within the health information field. Between 2008 and 2010 news sources were mostly identified, male, national and official. And journalists usually highlighted sources related to the health sector⁵. Official sources always had a prevailing place in the news, especially those within political power or public direction boards. Specialized sources also had a relevant place. Nonetheless, these sources had more value when they were institutional representatives rather than individual elements. Within this group, doctors were the most required ones and they were more valued when ahead of the Doctors National Board or a medical association than as known specialists. As stated by other studies (as Corbett & Mori, 1999; or Tanner, 2004), our research confirmed that health reporters are dependent on the medical community for scientific information and for producing comprehensive explanations on the health subjects; and it suggested that the health reporter's reliance on sources is exacerbated by the technical nature of health and medical news.

All of those conditions and journalistic options have important health information consequences, giving political issues a prevailing position over other themes. The questions that emerged within this investigation were: *whose voices are privileged, why and what is the effect on theme selection*. The conclusions indicate that the official sources' organization and power, as the media's own journalistic practices have a direct effect on the thematic coverage.

As for *Case Histories*, we couldn't find any especial justification on the media tendency to produce regular panoramic news on health topics. Our study showed that news stories analyzing the state of affairs on diseases, treatment processes, hospital conditions, among others, are very common on Portuguese health news reporting. This type of news is easy to produce (because it may not be dependent on a particular date) and it is appealing to consumers as gives them background information on the themes and it can contribute to increase health literacy in general.

⁵ When covering health, journalists do not hear a lot of news sources out of the health field. Sources who are not related to health are usually put aside by journalists. When that does not happen, journalists listen mostly to institutional sources in several fields of knowledge (economics, law, universities...).

Regarding *Risk/Alarm Situations*, it was a very contextual-related situation (linked to Influenza A alleged pandemics), but it made evident, once again, the power of official and institutional sources. When journalists prefer certain sources, they are simultaneously putting other in silence. This happened with nurses, patients, their families, and the common citizen during the pandemic period. Even if they are not patients, they could be heard as potential users of the health service. By privileging certain sources and its interests, while marginalizing others, the media coverage can contribute to the perpetuation of social power differentials.

As emphasized by the theory of agenda building (McCombs, 1992), this thematic study showed that the media, the government, and the society reciprocally affect one another, and in many instances the press is simply passing on the ideas and priorities set by institutions in society. The political, economic and social impact of these dynamics of the health information production environment should be equated by those evolved, namely by the journalistic class towards a more civic-oriented approach.

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